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## BIB DATA SHEET

CONFIRMATION NO. 5136

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.	
09/881,215	06/15/2001	514	1612	50229-267	
<b>RULE</b>					
<b>APPLICANTS</b> Peter A. Crooks, Lexington, KY; Aimee K. Bence, Lexington, KY; David R. Worthen, Lexington, KY;					
<b>** CONTINUING DATA *****</b> This appln claims benefit of 60/211,532 06/15/2000					
<b>** FOREIGN APPLICATIONS *****</b>					
<b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** SMALL ENTITY **</b> 08/25/2001					
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input type="checkbox"/> No Verified and Acknowledged <u>/ZOHREH A FAY/</u> Examiner's Signature	<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> KY	<b>SHEETS DRAWINGS</b> 1	<b>TOTAL CLAIMS</b> 20	<b>INDEPENDENT CLAIMS</b> 4
<b>ADDRESS</b> MCDERMOTT, WILL & EMERY 600 13th Street, N.W. Washington, DC 20005-3096 UNITED STATES					
<b>TITLE</b> Agmatine and agmatine analogs in the treatment of epilepsy, seizure, and electroconvulsive disorders					
<b>FILING FEE RECEIVED</b> 477	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:			<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	